PART B - FEE(S) TRANSMITTAL

MAR 0 6 2006

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

or Fax (571)-273-2885

42717

7590

01/18/2007

HAYNES AND BOONE, LLP 901 MAIN STREET, SUITE 3100 DALLAS, TX 75202

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certified that this Fee(s) Transmittal is being filed via EFS-Web System with the U.S. Patent and Trademark Office on the date indicated below.

Denise Wilson	(Depositor's name)
College Lesina	(Signature)
March 6, 2007	(Date)

			. De	nise Wilson	(Depositor's name)		
			5	Sind	(Signature)		
			Ma	arch 6, 2007		(Date	
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR		AT	TORNEY DOCKET NO.	CONFIRMATION NO.	
10/614,564 TITLE OF INVENTION	07/07/2003 METHOD AND APP	ARATUS FOR FILTERI	Ruei-Hung Jang ING CONTAMINANTS		24061.13	5840	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	E TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	04/18/2007	
EXAMINER AR		ART UNIT	CLASS-SUBCLASS]			
WILSON, GF	REGORY A	3749	454-187000	•			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
(A) NAME OF ASSIC	GNEE Inductor Manufacturing	Company, Ltd.	data will appear on the part of the part o	and STATE OR COU	NTRY)		
			printed on the patent): Individual Corporation or other private group entity Government 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 08-1394 (enclose an extra copy of this form).				
NOTE: The Issue Fee and	SMALL ENTITY state	s. See 37 CFR 1.27.	b. Applicant is no long	er claiming SMALL E	NTITY status. Sec 37 CF d attorney or agent; or the	R 1.27(g)(2). e assignee or other party in	
Authorized Signature			Date March 6, 2007				
Typed or printed name David M. O'Dell			Registration No. 42,044				

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. 4150, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

00000695 10614564 03/07/2007 INTEFSW

PTOL-85 (Rev. 07/06) Approved for use \$50.00 DA 02 FC:1504 300.00 DA

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE